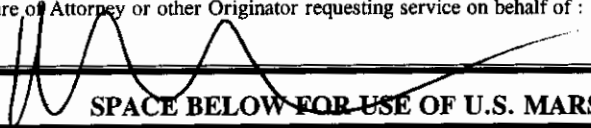
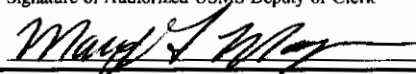
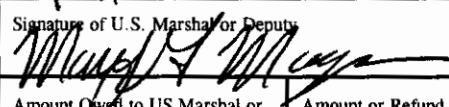


U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER CR-04-10288-RWZ	
DEFENDANT JOSEPH BALDASSANO		TYPE OF PROCESS Preliminary Order of Forfeiture	
SERVE ↓ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN PUBLICATION		
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)		
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285	RECEIVED U.S. MARSHALS SERVICE BOSTON, MA 2006 AUG 31 11:04
Kristina E. Barclay, Assistant U.S. Attorney United States Attorney's Office John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, MA 02210		Number of parties to be served in this case	
		Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)			
Please publish a copy of the attached Notice of Forfeiture at least once per week for three successive weeks in the <u>Boston Herald</u> or any other newspaper having a general circulation in this District, in accordance with the attached Preliminary Order of Forfeiture and applicable law.			
CATS ID No. 04-DEA-438744		JLJ x.3297	
Signature of Attorney or other Originator requesting service on behalf of :		TELEPHONE NUMBER	DATE
		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	(617) 748-3100 August 30, 2006
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <u>38</u>	District to Serve No. <u>38</u>
Signature of Authorized USMS Deputy or Clerk		Date	
		<u>8/31/06</u>	
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.			
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).			
Name and title of individual served (If not shown above).		<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)		Date of Service <u>10/19/06</u>	Time am pm
Signature of U.S. Marshal or Deputy			
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges
			Advance Deposits
Amount Owed to US Marshal or		Amount or Refund	

REMARKS:

Advertised in the Boston Herald on
Sep 5, Sep 12 and Sep 19, 06.


PRIOR EDITIONS MAY
BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD ☐ NOTICE OF SERVICE ☐ BILLING STATEMENT ☐ ACKNOWLEDGEMENT OF RECEIPT